

Cluster Area CI: General Supervision (GS)

Question: Is effective general supervision of the implementation of the Individuals with Disabilities Education Act (IDEA) ensured through the Lead Agency's (LA) utilization of mechanisms that result in all eligible infants and toddlers and their families having an opportunity to receive early intervention services in natural environments (EIS in NE)?

Probes:

- GS.I Do the general supervision instruments and procedures (including monitoring, complaint and hearing resolution, etc.), used by the LA, identify and correct IDEA noncompliance in a timely manner?
- GS.II Are systemic issues identified and remediated through the analysis of findings from information and data collected from all available sources, including monitoring, complaint investigations and hearing resolutions?
- GS.III Are complaint investigations, mediations and due process hearings and reviews completed in a timely manner?
- GS.IV Are there sufficient numbers of administrators, service coordinators, teachers, service providers, paraprofessionals and other providers to meet the identified early intervention needs of all eligible infants and toddlers and their families?
- GS.V Do State procedures and practices ensure collection and reporting of accurate and timely data?

State Goal: (for reporting period July 1, 2002 through June 30, 2003)

- Effective general supervision of the implementation of the IDEA is ensured through the Lead Agency's utilization of mechanisms that result in all eligible infants and toddlers and their families having an opportunity to receive early intervention services in natural environments.

Performance Indicators: (for reporting period July 1, 2002 through June 30, 2003)

- GS.I The general supervision instruments and procedures (including monitoring, complaint and hearing resolution, etc.), used by the LA, identify and correct IDEA noncompliance in a timely manner.
- GS.II Systemic issues are identified and remediated through the analysis of findings from information and data collected from all available sources, including monitoring, complaint investigations and hearing resolutions.
- GS.III Complaint investigations, mediations and due process hearings and reviews are completed in a timely manner.
- GS.IV There are sufficient numbers of administrators, service coordinators, teachers, service providers, paraprofessionals and other providers to meet the identified early intervention needs of all eligible infants and toddlers and their families.
- GS.V State procedures and practices ensure collection and reporting of accurate and timely data.

GS.I The general supervision instruments and procedures (including monitoring, complaint and hearing resolution, etc.), used by the LA, identify and correct IDEA noncompliance in a timely manner.

From OSEP letter on Self-Assessment, dated 03/2003:

OSEP cannot determine from the Self-Assessment:

- (1) the extent to which DESE has monitored, for compliance with Part C requirements, all of the agencies, institutions, and organizations used by the State to carry out Part C, including the extent to which DESE has monitored each of the SPOEs;
- (2) the effectiveness of DESE's monitoring procedures in identifying noncompliance; and
- (3) the effectiveness of DESE's procedures in ensuring the timely and effective correction of noncompliance.

1. Baseline/Trend Data and Analysis: (for reporting period July 1, 2002 through June 30, 2003)

Monitoring System Components

A system for monitoring of compliance with state and federal regulations implementing Part C of the Individuals with Disabilities Education Act (IDEA) has been developed to incorporate elements of the new Part C system redesign.

Elements of the monitoring system are:

- Review of data from Central Finance Office (CFO) reports
- On-site reviews at the SPOE to include:
 - Individual child record reviews
 - Staff interviews
 - Review of compliance with contractual obligations
- Review of surveys
 - Families
 - Providers
- Review of other public inputs
 - Phone calls
 - Mail (including e-mail)
 - Child complaints and due process hearing results

With the implementation of the CFO and the data system that it provides, a number of compliance requirements are monitored on a continuous basis through review of CFO reports. When review of these reports indicates potential compliance concerns, an immediate contact is made with the SPOE to investigate the issue.

Regular on-site reviews will also be scheduled with each SPOE. Prior to an on-site review, data reports will be analyzed, as well as review of information from surveys and other public inputs.

The monitoring system will address Early Intervention compliance standards and indicators developed around the Office of Special Education Programs (OSEP) cluster areas and indicators as well as the State Performance Goals and Indicators. To date, no monitoring of ongoing service coordinators or providers has occurred. This will change as the new RFP is put in place for Phase 1 SPOEs effective July 1, 2004. SPOEs will be responsible for overseeing all service coordination responsibilities. In addition, SPOEs will monitor progress notes being entered into the system by service providers.

A Peer Review Process will provide additional oversight for the system. Currently, the monitoring of service providers is scheduled to begin in July 2004 and will focus on the provision of services in accordance with the IFSP and in the natural environment. The Division is also going to be working with Alan Coulter from the National Center on Special Education Accountability Monitoring to develop a focused monitoring system during the summer of 2004.

Individual SPOE Noncompliance Issues Identified for FY 2002-03

	SPOE 1	SPOE 2	SPOE 4	SPOE 5	SPOE 6
	St. Charles	St. Louis	Atchison Area	Andrew Area	Platte-Clay-Ray
Provision of Prior Written Notice.			X	X	X
Content of Notice.				X	
Provision of Services.					X
Documentation of members of Multidisciplinary Evaluation Team.	X	X			
Application of eligibility criteria, particularly the use of Informed Clinical Opinion for children identified as eligible for services under the category of Developmental Delay.	X	X	X	X	X
Lack of documentation of the basis for the determination of eligibility.	X	X	X	X	X
The 45-day timeline for development of an IFSP from the date of referral was not being met.	X	X	X	X	X
Requirements for conducting a Family Assessment were not clearly understood.	X	X	X	X	X

Correction of Previous Noncompliance

DMH and DHSS were previously responsible for provision of services. Under the redesigned system, this is no longer the case. The following table shows that some areas of previous noncompliance have been resolved with the redesign, however others are still a concern. These areas are being monitored. The new RFP, to be implemented in July 2004, also addresses many of these areas by making SPOEs responsible for all aspects of the First Steps system within their regions.

Monitoring/Self-Study DMH/DHSS 1996-1999	Change	Phase 1 Initial Monitoring November, 2002
1. Lack of adequate notices and consents for evaluations and early intervention services	Development of standard forms; training of service coordinators Phase 1 SPOE staff was trained on the model forms in January and February of 2002.	Compliance Problem SPOEs 4, 5, 6
2. Failure to meet the 45 day timeline for evaluation and IFSP development	Development of vendor-based private service coordination to enhance capacity Phase 1 SPOE staff was trained on the model forms in January and February of 2002.	Compliance Problem SPOEs 1, 2, 4, 5, 6
3. Lack of written notification of IFSP meetings	Development of standard letter; training of service coordinators Phase 1 SPOE staff was trained on the model forms in January and February of 2002.	Not a problem
4. Lack of an IFSP document with all required components	Development of standard forms; training of service coordinators Phase 1 SPOE staff was trained on the model forms in January and February of 2002.	Not a problem
5. Lack of documentation of all early intervention services	Development of standard forms; training of service coordinators Phase 1 SPOE staff was trained on the model forms in January and February of 2002.	Compliance Problem SPOE 6
6. Lack of documentation for required developmental assessments	Development of standard forms; training of service coordinators Phase 1 SPOE staff was trained on the model forms in January and February of 2002.	Not a problem
7. Failure to notify the public of confidentiality procedures	DESE to develop public announcement and publish statewide DESE will conduct	Not a problem

Monitoring/Self-Study DMH/DHSS 1996-1999	Change	Phase 1 Initial Monitoring November, 2002
8. Failure to appropriately apply eligibility criteria	Development of process document/form and development of training module to address this issue. Phase 1 SPOE staff was trained on the model forms in January and February of 2002.	Compliance Problem SPOEs 1, 2, 4, 5, 6

Follow-up monitoring for the St. Louis SPOE conducted in November 2003 indicates that St. Louis still has issues in several areas. The remainder of Phase 1 follow-ups will be conducted in April and May of 2004. Many of these issues are addressed through the new RFP. Preliminary results for Phase 1 follow-ups and Phase 2 initial monitoring suggest that there are still areas of noncompliance, especially surrounding the application of eligibility criteria and meeting timelines. No monitoring of ongoing service coordinators or providers has occurred to this point. Many issues are addressed with the new webSPOE software and Phase 1 RFP, to be implemented in July 2004.

2. Targets: (for reporting period July 1, 2002 through June 30, 2003)

- Any areas of noncompliance identified and corrected in a timely manner.
- All Phase 1 SPOEs monitored in 2002-03.
- Monitoring staff to provide technical assistance for areas of noncompliance.

3. Explanation of Progress or Slippage: (for reporting period July 1, 2002 through June 30, 2003)

The new RFP for Phase 1 SPOEs addresses the lack of oversight and monitoring of service coordinators and providers. The new webSPOE software is very compliance driven and will ensure compliance proactively rather than after the fact.

Due to the full implementation towards the end of the reporting year (July 1, 2002 through June 30, 2003), data provided under "Baseline/Trend Data and Analysis" will be considered baseline. The only monitoring conducted in 2002-03 was for Phase 1 SPOEs that began operation April 1, 2002. The focus for the majority of 2002-03 was to reach full implementation for the redesigned First Steps program.

Significant progress in all areas was seen as Missouri completed implementation of a redesigned Part C system in March 2003. The redesign resulted in:

- Establishment of a Central Finance Office (CFO) and centralized child-level data system
- Establishment of 26 System Points of Entry covering the state
- Establishment of a system to credential providers
- Establishment of key components of a personnel development system including the following training modules: Orientation, Evaluation and Assessment, IFSP Outcomes in the Natural Environment, Transition, and Service Coordination

The redesigned First Steps system and practices are intended to ensure the following:

- Improved coordination between families and providers
- Decision-making between the Department of Elementary and Secondary Education (DESE), the CFO and SPOEs
- Data collection and analysis based on the SPOE data system
- Improved monitoring due to the amount of data available about children served

4. Projected Targets:

- All Phase 2 SPOEs will be monitored during 2003-04.
- All Phase 1 follow-ups conducted in 2003-04.
- Any areas of noncompliance are identified and corrected in a timely manner.
- Additional projected targets are in the Future Activities tables.

5. & 6. Future Activities to Achieve Projected Targets/Results and Projected Timelines and Resources:

New Cluster/ Probe	IP Key	Activity Key	Activity Groups (5)	Future Activities to Achieve Projected Targets (5)	Projected Targets/ Evidence of Change (4)	Projected Timelines (6)	Resources (6)
GS.I	4.3	4.3.1	Development of monitoring standards	Timely provision of appropriate EI services	Services received in timely manner	4/2004	Comp
GS.I CC.I CC.II	4.3	4.3.2	Development of monitoring standards	Review application of eligibility criteria	Inappropriate eligibility determinations decreased	7/2003	Comp
GS.I CF CBT	4.3	4.3.3	Development of monitoring standards	Monitor for use and completion of mandated IFSP form	Revisions to mandated IFSP form completed	7/2004	Comp
GS.I CE.I CBT	4.3	4.3.4	Development of monitoring standards	Monitor for timely conduct of transition meetings	Timely transitions from Part C	9/2003	Comp
GS.I GS.II GS.V	4.4	4.4.1	Development of monitoring system	Monitoring of SPOEs	Ongoing monitoring, correction of past deficiencies, enforcement actions implemented if needed	Ongoing	Comp
GS.I GS.II CE.I CE.II CE.III CBT	4.4	4.4.2	Development of monitoring system	DESE will examine policies and procedures re: eval/assess, eligibility determination, IFSP development, and C to B Transition with timelines, to ensure that these are clearly understood and consistently applied by SPOE staff, ongoing service coordinators and service providers.	Ongoing monitoring, correction of past deficiencies, enforcement actions implemented if needed	10-11/2003	Comp

New Cluster/ Probe	IP Key	Activity Key	Activity Groups (5)	Future Activities to Achieve Projected Targets (5)	Projected Targets/ Evidence of Change (4)	Projected Timelines (6)	Resources (6)
GS.I GS.II	4.4	4.4.3	Development of monitoring system	Monitoring of service coordinators	Ongoing monitoring, correction of past deficiencies, enforcement actions implemented if needed	7/2004 Ongoing	Comp
GS.I GS.I	4.4	4.4.4	Development of monitoring system	Monitoring of providers	Ongoing monitoring, correction of past deficiencies, enforcement actions implemented if needed	7/2004 Ongoing	Comp
GS.I	4.4	4.4.5	Development of monitoring system	Develop schedule for onsite monitoring of SPOEs	Schedule developed	Ongoing	Comp
GS.I GS.II	4.4	4.4.6	Development of monitoring system	Identify standards to be monitored	Standards identified	2003-04	Comp
GS.I GS.II	4.4	4.4.9	Development of monitoring system	Develop written monitoring procedures	Procedures developed	2003-04	Comp
GS.I CE.II	4.4	4.4.9.1	Development of monitoring system	Review eligibility determination document form (eval/assess covers five developmental areas)	Evaluation/Assessment includes information on all five developmental areas	4/2004	CMS, Comp
GS.I CE.II	4.4	4.4.9.2	Development of monitoring system	Review of IFSP for family assessment consent	Family assessment conducted with consent	4/2004	CMS, Comp
GS.I CE.III	4.4	4.4.9.6	Development of monitoring system	All services identified on IFSP are received	IFSP services and authorizations correspond	Ongoing	Comp
GS.I CBT	4.5		Follow up of Phase 1 SPOEs		Correction of non-compliance, enforcement actions implemented if needed	10-11/2003 4-5/2004	Comp
GS.I CBT	4.6		Initial Monitoring of Phase 2 SPOEs		Initial monitoring completed, enforcement actions implemented if needed	10-11/2003, 4-5/2004	Comp
GS.I GS.II GS.IV	7.1	7.1.1	Facilitators	Determine if we want to continue	All areas in compliance	7/04, Ongoing	Funds, Monitoring system

New Cluster/ Probe	IP Key	Activity Key	Activity Groups (5)	Future Activities to Achieve Projected Targets (5)	Projected Targets/ Evidence of Change (4)	Projected Timelines (6)	Resources (6)
GS.I GS.II GS.IV	7.1	7.1.2	Facilitators	Review work scope of facilitators	All areas in compliance	7/04, Ongoing	Funds, Monitoring system
GS.I GS.II GS.IV	7.1	7.1.3	Facilitators	Can a SPOE be a facilitator?	All areas in compliance	7/04, Ongoing	Funds, Monitoring system
GS.I GS.II GS.IV	7.2		SPOE Oversight	Review existing system and develop for oversight of service coordinators and providers	All areas in compliance	7/04, Ongoing	Funds, Monitoring system
GS.I GS.II GS.IV	7.3		First Steps Consultants	Revise/expand contracts to provide technical assistance and monitoring of SPOEs	All areas in compliance	7/04, Ongoing	Funds, Monitoring system

GS.II Systemic issues are identified and remediated through the analysis of findings from information and data collected from all available sources, including monitoring, complaint investigations and hearing resolutions.

1. Baseline/Trend Data and Analysis (for reporting period July 1, 2002 through June 30, 2003)

See tables in GS.I. Four monitoring standards showed noncompliance in all of the Phase 1 SPOEs. The standards included the following:

- Application of eligibility criteria, particularly the use of Informed Clinical Opinion for children identified as eligible for services under the category of Developmental Delay
- Lack of documentation of the basis for the determination of eligibility.
- The 45-day timeline for development of an IFSP from the date of referral was not being met
- Requirements for conducting a Family Assessment were not clearly understood.

Noncompliance in all Phase 1 SPOEs indicates that these were systemic issues, and all are being addressed in current initial and follow-up monitoring as well as trainings.

Sixteen child complaints were filed in 2002-03. Ten of those had findings of noncompliance. Allegations included referral issues, timelines and transition, some of which coincide with monitoring results for that year. Child complaints increased from three in 2001-02 to sixteen in 2002-03. Most of the complaints are from the St. Louis area dealing with timelines. St. Louis had numerous start-up and staffing challenges, many of which were exacerbated by the contract situation in which no additional funds were available to deal with staffing issues. The St. Louis SPOE is part of Phase 1 and is currently being re-bid under the new RFP.

2. Targets: (for reporting period July 1, 2002 through June 30, 2003)

Systemic issues are identified and remediated.

3. Explanation of Progress or Slippage: (for reporting period July 1, 2002 through June 30, 2003)

The new RFP for Phase 1 SPOEs addresses the lack of oversight and monitoring of service coordinators and providers. The new webSPOE software is very compliance driven and will ensure compliance proactively rather than after the fact.

Due to the full implementation towards the end of the reporting year (July 1, 2002 through June 30, 2003), data provided under “Baseline/Trend Data and Analysis” will be considered baseline. The focus for the majority of 2002-03 was to reach full implementation for the redesigned First Steps program.

4. Projected Targets:

- Systemic issues are identified and remediated.
- Additional projected targets are in the Future Activities tables.

5. & 6. Future Activities to Achieve Projected Targets/Results and Projected Timelines and Resources:

See also GS.I, GS.IV, CE.I and CBT

New Cluster/ Probe	IP Key	Activity Key	Activity Groups (5)	Future Activities to Achieve Projected Targets (5)	Projected Targets/ Evidence of Change (4)	Projected Timelines (6)	Resources (6)
GS.II	4.4	4.4.7	Development of monitoring system	Develop report formats	Report formats developed	2004-05	Comp
GS.II	4.4	4.4.8	Development of monitoring system	Develop CMS for First Steps	CMS developed for First Steps	2004-05	Comp
GS.II	4.4	4.4.9.3	Development of monitoring system	Identify data reports from system	Data reports identified	2003-04	Data, Comp
GS.II	4.4	4.4.9.4	Development of monitoring system	Identify the standards that can be monitored via the reports	Standards identified	2003-04	Comp
GS.II	4.4	4.4.9.5	Development of monitoring system	Identify the standards that require onsite visits	Standards identified	2003-04	Comp
GS.II GS.III	4.7	4.7.6	Monitoring of data reports	Monitor complaint system	Utilized in monitoring system, parents aware of and have access to rights	2003-04 Ongoing	DSE Staff
GS.II	4.7	4.7.7	Monitoring of data reports	Examine monitoring reports	All in compliance	7/2004 Ongoing	DSE Staff

GS.III Complaint investigations, mediations and due process hearings and reviews are completed in a timely manner.**1. Baseline/Trend Data and Analysis** (for reporting period July 1, 2002 through June 30, 2003)

	2001-02		2002-03	
	Child Complaints	Due Process	Child Complaints	Due Process
Total Filed	3	1	16	1
Completed within Timelines	2	0	13	0
Withdrawn	1	1	3	1
Completed outside of Timelines	0	0	0	0

2. Targets: (for reporting period July 1, 2002 through June 30, 2003)

- All complaint investigations, mediations and due process hearing and reviews are completed in a timely manner.

3. Explanation of Progress or Slippage: (for reporting period July 1, 2002 through June 30, 2003)

In school year 2001-2002, the Division of Special Education created a position of Child Complaint Coordinator. This change was due to the number of extensions in prior years and the workloads of other monitoring supervisors. Having one person to coordinate all activities regarding child complaints has been instrumental in decreasing the number of child complaint extensions. Also, the creation of the new child complaint database provides a regular report of child complaints that are nearing the end of timelines.

Due to the full implementation towards the end of the reporting year (July 1, 2002 through June 30, 2003), data provided under "Baseline/Trend Data and Analysis" will be considered baseline. The focus for the majority of 2002-03 was to reach full implementation for the redesigned First Steps program.

4. Projected Targets:

- All complaint investigations, mediations and due process hearing and reviews are completed in a timely manner.
- Additional projected targets are in the Future Activities tables.

5. & 6. Future Activities to Achieve Projected Targets/Results and Projected Timelines and Resources:

See GS.II

This is a maintenance area for Missouri.

GS.IV There are sufficient numbers of administrators, service coordinators, teachers, service providers, paraprofessionals and other providers to meet the identified early intervention needs of all eligible infants and toddlers and their families.

From OSEP letter on Self-Assessment dated 03/2003:

OSEP cannot determine from the Self-Assessment the extent to which there are shortages of qualified personnel (including public and private service providers, service coordinators and paraprofessionals) to provide early intervention services, and, if there are, the impact of such shortages on the provision of timely and appropriate services to infants and toddlers and their families, as specified in their IFSPs.

1. Baseline/Trend Data and Analysis (for reporting period July 1, 2002 through June 30, 2003)

Provision of Services

- Intake Service Coordination is provided through contracts with the Lead Agency. Through a system of 26 System Points of Entry (SPOEs), intake service coordinators accept referrals and coordinate the evaluation process to determine eligibility for the Part C system.
- DMH, through the interagency agreement, funds ongoing Service Coordination for up to 2300 eligible infants and toddlers. Service coordination for all other eligible infants and toddlers is provided via independent service coordinators who have contractual agreements with the lead agency. All service coordinators are enrolled with the Central Finance Office and are listed on the State's Provider Matrix, which allows families to select their ongoing service coordinator. These systems of service coordination provide choice for families as well as the timely selection of service coordinators by families.
- Qualified personnel who are under contract with DESE provide all other early intervention services required by Part C. These providers bill the Central Finance Office (CFO). The CFO in turn, bills Department of Social Services (Medicaid) who reimburses the CFO per the interagency agreement between DMS and DESE.
- Payments to providers in Missouri's Part C system are based on the state's Medicaid reimbursement rate. This rate includes a natural environments incentive for services provided in those settings. As a result, the state's Medicaid office will not approve any added payment for travel expenses incurred by providers when serving children in the natural environment. Missouri is primarily a rural state and attracting providers to the Part C system is challenging when the pay rate is so low and providers must drive long distances to serve children with no reimbursement for the time on the road or the costs associated with the travel.

SPOE Intake Coordinators	Average Monthly Referrals*	Intake Service Coordinator FTE**	Average Referrals per Intake Coordinator per Month
St. Louis (Region 2)	142.79	8.50	16.80
St. Charles (Region 1)	35.71	6.00	5.95
Other Phase 1 SPOEs (Regions 4, 5, 6)	35.00	9.75	3.59
Kansas City (Region 9)	61.50	3.50	17.57
Springfield (Region 13)	27.50	1.00	27.50
Jefferson County (Region 3)	26.25	1.50	17.50
Other Phase 2 SPOEs	147.75	15.85	9.32

* See data in CC.I

** Intake Coordinator needs as outlined in contractors' bids for SPOE regions

Providers of Special Education Services by Service Type and Caseload

	6/30/2003				
Provider Type	A Number of Children Receiving Services	B Number of Enrolled Providers	C Number of Providers Providing Services	D Average Caseload	E Percent of Providers Providing Services
ABA	58	218	126	0.46	57.8%
Assistive Technology Providers	325	105	59	5.51	56.2%
Audiologist	79	22	11	7.18	50.0%
Interpreters (Bilingual and Sign)	38	29	16	2.38	55.2%
Nurses	77	33	9	8.56	27.3%
Nutritionists	209	10	9	23.22	90.0%
Occupational Therapists	1,918	491	336	5.71	68.4%
Orientation and Mobility Specialists	17	8	3	5.67	37.5%
Physical Therapists	1,811	427	303	5.98	71.0%
Physicians and Pediatricians	3	2	1	3.00	50.0%
Psychologists	11	4	3	3.67	75.0%
Service Coordination	3,297	228	173	19.06	75.9%
Social Workers	69	39	21	3.29	53.8%
Special Instruction	1,307	273	226	5.78	82.8%
Speech and Language Pathologists	2,420	613	444	5.45	72.4%
Total	11,639	2,502	1,740	6.69	69.5%

Source: Provider listing from CFO and SuperSPOE database as of 2/22/04

Notes:

A – Number of children receiving services on June 30, 2003

B – Number of providers enrolled with the CFO as of June 30, 2003

C – Number of enrolled providers who were providing services to the children in column A

D – Average caseload = column A / column C

E – Percent of Enrolled Providers Providing Services = column C / column B

Provider Module Training during 2002-03

Module Title	Sessions	Attendees
Module I: FS Orientation	21	430
Module II: FS Evaluation and Assessment	12	248
Module III: IFSP Outcomes in Natural Environment	7	138
Module IV: FS Transition	4	96
Specialty Module: Service Coordination	6	57
Total*	50	969

* Total attendees may be duplicated if providers attended multiple trainings.

Source: STRS database from Center for Innovations in Education (CISE)

The current SPOE system allows for a less than full-time director or administrator, however the new Phase 1 RFP requires a full-time director who shall be responsible for over-all program oversight, all administrative functions associated with operating the SPOE, and ensuring that day to day operations are conducted in a business-like manner at all times. Based on 2002-03 data, Intake Coordinators at SPOEs have varying average monthly caseloads by region. The SPOE regions with the largest average referral caseloads are the SPOEs that are having the most trouble meeting 45 day timelines. Therefore, it appears that some SPOEs are not adequately staffed to handle all referrals in a timely manner. At a statewide level, the average caseload for providers is very low to reasonable, but we know, from various inputs from SPOEs, the SICC and service coordinators, that there are provider shortages, particularly in rural areas and for some provider types. We also are aware that there are many providers listed on the provider matrix who are not currently serving any First Steps children and appear to have little intent to provide any First Steps services. The Division is currently working on removing non-participating providers from the matrix. In addition, the new webSPOE software will add a "No Provider Available" option so that data on provider shortages can be collected and analyzed and used to focus provider recruitment efforts.

2. Targets: (for reporting period July 1, 2002 through June 30, 2003)

- There are sufficient numbers of trained administrators, service coordinators, teachers, service providers, paraprofessionals and other providers to meet the identified early intervention needs of all eligible infants and toddlers and their families.

3. Explanation of Progress or Slippage: (for reporting period July 1, 2002 through June 30, 2003)

Provider recruitment has been a priority since implementation of the redesigned program began in April of 2002. Continued efforts are needed to identify areas in which there are shortages as well as target recruitment efforts to those areas. In order to have enough providers to provide services, deadlines for training requirements were extended to allow providers to enroll. Deadlines have been re-established as June 30, 2004 for Phase 1 and December 1, 2004 for Phase 2. All providers wishing to enroll as new providers must complete Module I - Orientation before they can enroll with the CFO as of April 1, 2004. The deadline for all currently enrolled providers to complete Module I - Orientation is May 1, 2004. Changes to the SPOE software and the Phase 1 RFP address provider shortages and recruitment issues. Currently, five module trainers are IHE faculty members and are imbedding training modules into curricula.

Due to the full implementation towards the end of the reporting year (July 1, 2002 through June 30, 2003), data provided under "Baseline/Trend Data and Analysis" will be considered baseline. The focus for the majority of 2002-03 was to reach full implementation for the redesigned First Steps program.

4. Projected Targets:

- All services identified in IFSPs will be provided.
- No child will go without a needed service because of lack of providers.
- Additional projected targets are in the Future Activities tables.

5. & 6. Future Activities to Achieve Projected Targets/Results and Projected Timelines and Resources:

See also GS.I, CE.I and CE.IV

New Cluster/ Probe	IP Key	Activity Key	Activity Groups (5)	Future Activities to Achieve Projected Targets (5)	Projected Targets/ Evidence of Change (4)	Projected Timelines (6)	Resources (6)
GS.II GS.IV	5.2	5.2.5	Develop and implement new training modules	Coordinate data for CISE and CFO for better planning for training	Data coordinated	Ongoing	EP, CISE, CFO
GS.IV	6.2	6.2.7	Update Child Data System	Add "No Provider Available"	All services provided	2004-05	Data
GS.IV	10.1	10.1.1	Review personnel exemptions	Revise personnel standards	Standards revised	2003-04	EP, Comp
GS.IV	10.1	10.1.2	Review personnel exemptions	Develop written procedures regarding exemption process	Procedures developed	2003-04	EP
GS.IV	10.1	10.1.3	Review personnel exemptions	Move process to CFO	Process moved	2004-05	EP
GS.IV CE.I	10.2		Review and revise credentialing process		All providers credentialed	3/2005	EP, CFO
GS.IV	10.3		Revise personnel guide	Revise personnel standards	Standards revised	2003-04	EP
GS.IV GS.V	10.4	10.4.1	Monitor availability of qualified personnel	Monitor Specialty by SPOE by County report	Providers are qualified, timely evaluation/assessment	Ongoing	DSE Staff
GS.IV GS.V	10.4	10.4.2	Monitor availability of qualified personnel	Monitor State Map of PT/OT/Speech Providers	Providers are qualified, timely evaluation/assessment	Ongoing	DSE Staff
GS.IV GS.V	10.4	10.4.3	Monitor availability of qualified personnel	Monitor State Map of Service Coordinators	Providers are qualified, timely evaluation/assessment	Ongoing	DSE Staff
GS.IV GS.V	10.4	10.4.4	Monitor availability of qualified personnel	Monitor on-line service provider matrix	Providers are qualified, timely evaluation/assessment	Ongoing	DSE Staff
GS.IV GS.V	10.4	10.4.5	Monitor availability of qualified personnel	Make contacts with SPOEs and FS Facilitators	Providers are qualified, timely evaluation/assessment	Ongoing	DSE Staff
GS.IV GS.V	10.4	10.4.6	Monitor availability of qualified personnel	Monitor Child Complaint Findings	Providers are qualified, timely evaluation/assessment	Ongoing	DSE Staff
GS.IV	10.5	10.5.1	Provider recruitment and enrollment	Utilize data reports	Provider shortage decreases, recruitment activities implemented	Ongoing	EP, Facilitators, SPOEs

New Cluster/ Probe	IP Key	Activity Key	Activity Groups (5)	Future Activities to Achieve Projected Targets (5)	Projected Targets/ Evidence of Change (4)	Projected Timelines (6)	Resources (6)
GS.IV	10.5	10.5.1.1	Provider recruitment and enrollment	Monitor Specialty by SPOE by County report	Provider shortage decreases, recruitment activities implemented	Ongoing	EP, Facilitators, SPOEs
GS.IV	10.5	10.5.1.2	Provider recruitment and enrollment	Monitor State Map of PT/OT/Speech Providers	Provider shortage decreases, recruitment activities implemented	Ongoing	EP, Facilitators, SPOEs
GS.IV	10.5	10.5.2	Provider recruitment and enrollment	Provide ongoing enrollment information	Provider shortage decreases, recruitment activities implemented	Ongoing	EP
GS.IV	10.5	10.5.3	Provider recruitment and enrollment	Revise provider enrollment web page	Provider shortage decreases, recruitment activities implemented	Ongoing	EP
GS.IV	10.5	10.5.4	Provider recruitment and enrollment	Develop process and procedures for recruitment	Provider shortage decreases, recruitment activities implemented	Ongoing	EP, Facilitators, SPOEs
CE.I GS.IV	10.5	10.5.5	Provider recruitment and enrollment	Service Coordinator Credentialing	All Service Coordinators credentialed	3/2005	EP,CFO
CE.I GS.IV	10.5	10.5.6	Provider recruitment and enrollment	Supervision of associates		Ongoing	EP
CE.I GS.IV	10.5	10.5.7	Provider recruitment and enrollment	Make available service coordinator recruitment brochure and information through facilitators	Sufficient number of Service Coordinators to meet demands	Ongoing	Facilitators, Funds
CE.I GS.IV	10.5	10.5.8	Provider recruitment and enrollment	Continue implementation of provider recruitment plan through facilitators	Sufficient number of providers to meet demands	Ongoing	Facilitators, EP

GS.V State procedures and practices ensure collection and reporting of accurate and timely data.**1. Baseline/Trend Data and Analysis** (for reporting period July 1, 2002 through June 30, 2003)

Various efforts have been made to ensure the accuracy of data entered by the SPOEs:

- Each SPOE is the electronic record-keeper for the children served in their area. System requirements demand accurate and timely data entry at the child level in order for the children to have valid authorizations for services. These data are maintained at the SPOE and are batched to the CFO on a regular basis.
- Twice a month the CFO sends to DESE an up-to-date superSPOE database that contains child and family data including demographics and eligibility, IFSP information and service authorizations data, among other items. This database is used to aggregate and disaggregate data through Access queries for federal reporting purposes, and data is monitored for irregularities through various query results. Questions and clarifications are asked of the SPOEs as appropriate. Examples of data clean-up required based on the database include children without service coordinators listed in the software, children whose electronic record may need to be inactivated, children incorrectly marked as duplicates, children in referral over 45 days, etc.
- A SPOE data report is compiled from the SuperSPOE and posted on the web monthly. This report contains referral, timelines, IFSP and inactivation data by SPOE. Posting this report has encouraged more accurate data entry.
- Data is being used for monitoring. Some reports are used for desk reviews while other data is used to determine which SPOEs to monitor on-site.
- SPOE training on the software was conducted prior to implementation for both Phase 1 and 2. This training, along with technical assistance from the CFO help desk, supports more accurate data entry.

The CFO database is backed up incrementally nightly with full backups occurring on the weekends. These backups are in underground caves. This allows the greatest degree of protection from natural events and provides the CFO Operations Facility and the Early Intervention/CFO data protection.

The hardware is protected from fire hazard with dual-zone FM200 fire protection. An independently contracted company continuously monitors this system around the clock and the Operations Facility is audited yearly by Kansas City Fire and Security, L.L.C.

The hardware is housed in a Data Center in the CFO Operations Facility based in Lenexa, Kansas. The Data Center has a 50KVA Full On-Line Multi-Phase Uninterruptible Power Supply capable of supplying any needed 110 and 220-volt power demands. This system protects the Data Center and the hardware in case of power failure, power fluctuations or 'brown-out' power conditions.

The Operations Facility is entry-controlled with all access logged and controlled by card key and sign-in procedures. The procedures allow proper security protection for the hardware, software and the data of the Early Intervention program.

The database is housed on servers that are protected from hard-drive failure with RAID-5 and RAID-1. This server configuration allows for limited hard drive failure without any interruption in the levels of service provided. This level of hardware protection protects against prolonged server 'down-time.'

2. Target: (for reporting period July 1, 2002 through June 30, 2003)

- Data collection and reporting is accurate and timely.

3. Explanation of Progress or Slippage: (for reporting period July 1, 2002 through June 30, 2003)

See SPOE software changes in the Introduction section for information on upcoming changes to the SPOE software that will significantly impact the quality and quantity of available data as well as significantly enhance monitoring efforts.

Due to the full implementation towards the end of the reporting year (July 1, 2002 through June 30, 2003), data provided under "Baseline/Trend Data and Analysis" will be considered baseline. The focus for the majority of 2002-03 was to reach full implementation for the redesigned First Steps program.

4. Projected Targets:

- Data collection and reporting is accurate and timely.
- Additional projected targets are in the Future Activities tables.

5. & 6. Future Activities to Achieve Projected Targets/Results and Projected Timelines and Resources:

See GS.I, GS.IV and CE.I